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26753 7590 06/29/2005

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07/19/2005 RMEBRAH1 00000027 502401 09824921

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Aleshia T. Prange

(Depositor's name)

Aleshia T. Prange

(Signature)

July 13, 2005

(D)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/824,921	04/02/2001	Scott J. Carter	XWXXWXXWXX	2126

TITLE OF INVENTION: OBJECT LOCATION MONITORING SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	XSS NO	X\$700 \$1,400	\$0	\$700 \$1,400	09/29/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BROWN, VERNAL U	2635	340-010100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	Andrus, Sceales, Starke & Sawall, LLP
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.		2 _____
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GE Medical Systems Information Technologies, Inc. Milwaukee, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature

Christopher M. Scherer

Date July 13, 2005

Typed or printed name

Christopher M. Scherer

Registration No. 50,655

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